



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

'07 JAN 18 AIO :37

STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Anonsen	William	Finn	808 232-1831
MAILING ADDRESS (Street)			FAX
P.O. Box 6387			808 235-5660
(City)	(State)	(Zip Code)	
Kaneohe	Hawaii	96744	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
			808 232-1831
MAILING ADDRESS (Street)			FAX
P.O. Box 6387			808 235-5660
(City)	(State)	(Zip Code)	
Kaneohe	Hawaii	96744	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Ship Agents Association		808 232-1831
MAILING ADDRESS (Street)		FAX
869 N. Nimitz Highway		808 235-5660
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
William F. Anonsen		808 232-1831
MAILING ADDRESS (Street)		FAX
P.O. Box 6387		808 235-5660
(City)	(State)	(Zip Code)
Kaneohe	Hawaii	96744

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

William F. Anonsen

(Signature of Lobbyist)

1/15/07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

William F. Anonsen

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

President

NAME OF ORGANIZATION (if applicable)

Hawaii Ship Agents Association

TELEPHONE

808 232-1831

MAILING ADDRESS (Street)

869 North Nimitz Highway

FAX

808 235-5660

(City)

Honolulu

(State)

Hawaii

(Zip Code)

96817

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

William F. Anonsen

(Signature of Authorizing Officer or Person Represented)

1/15/07

(Date)